

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI
HATTIESBURG DIVISION

JEANETTER GRAHAM INDIVIDUALLY
AND AS WRONGFUL DEATH BENEFICIARY
OF ALBERT GRAHAM, DECEASED

PLAINTIFF

V.

CAUSE NO. 2:13CV67KS-MTP

ALEX HODGE, INDIVIDUALLY AND IN HIS
OFFICIAL CAPACITY AS SHERIFF OF JONES
COUNTY; JONES COUNTY, MISSISSIPPI AND
DEPUTY "JOHN DOE" IN HIS OFFICIAL CAPACITY

DEFENDANTS

DEPOSITION OF PATRICIA CAROL JOHNSTON
Taken at the offices of Jones County Courthouse, 415 North
5th Avenue, Laurel, Mississippi, on Friday, June 13, 2014,
beginning at approximately 10:15 a.m.

APPEARANCES:

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PRESENT AND REPRESENTING THE PLAINTIFF

JASON E. DARE, ESQUIRE
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PRESENT AND REPRESENTING DEFENDANT ALEX HODGE AND
JONES COUNTY, MISSISSIPPI

REPORTED BY:

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PROCEEDINGS

PATRICIA CAROL JOHNSTON,

called as a witness, having been duly sworn,
was examined and deposed as follows:

EXAMINATION BY MR. SANDERS:

Q. Would you state your name, please.

A. Patricia Carol Johnston.

Q. Ms. Johnston, my name is Everett Sanders. I'm
an attorney for Mrs. Jeanetter Graham in this matter.

A. Yes, sir.

Q. Have you given a deposition before?

A. No, sir.

Q. I'm going to be asking some questions, and if
you don't understand the question, you can ask me to repeat
it or explain it, otherwise, if you respond to it I'm gonna
assume that you understood what I was asking. Is that
fair?

A. Yes, sir.

Q. Is that fair?

A. Yes, sir.

Q. Okay.

A. I'm a little hard of hearing, I'm sorry.

Q. I'll speak up.

BY MR. SANDERS: Same stipulation?

BY MR. DARE: Yes. Just to make sure the

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record is clear, we would agree and stipulate to the
standard stipulations pursuant to the Federal Rules
of Civil Procedure. Thank you.

Q. Is it Johnston?

A. Yes.

Q. Ms. Johnston, are you employed?

A. Yes.

Q. How are you employed?

A. I'm employed with Jones County.

Q. In what capacity?

A. I am the nurse for the Jones County jail.

Q. And how long have you been so employed?

A. Since October of 2008.

Q. Tell me a little bit about your educational
background.

A. I am a licensed practical nurse. I was an EMT,
but I have let that license go. I have special training in
dialysis, worked at an OB clinic and a general
practitioner's clinic.

Q. Where did you go to school and get your LPN?

A. J.C., Jones County Junior College.

Q. When did you graduate?

A. I'm not sure. I think it was '80 or '81, I
can't remember.

Q. Have you ever had any disciplinary complaints

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1 with respect to the nursing board?

2 A. No, sir.

3 Q. Tell me, what are your duties and
4 responsibilities as -- well as nurse. Well, let me ask you
5 this: You said that you worked with Jones County Detention
6 Center. Is that the adult detention center?

7 A. Yes, sir.

8 Q. What are your duties and responsibilities
9 there?

10 A. Give medication, check on the inmates, make
11 sure that they're okay, listen to their complaints, help
12 them if I can, make appointments, doctor's appointments,
13 follow-ups.

14 Q. Are you involved in the booking process at all?

15 A. No, sir.

16 Q. When do you first come in contact with the
17 inmate or detainee?

18 A. When they come in, if I happen to be in
19 booking, then I'll listen to what their problems are
20 medically. If not, it's after they're booked in, and I
21 normally see their booking sheet normally.

22 Q. Are the booking sheets routed to you
23 automatically?

24 A. We have a box that's in booking that they're
25 supposed to put them in if there's any medical problems.

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1 Q. Okay, all right.

2 BY MR. SANDERS: Can we go off the record.

3 (OFF-THE-RECORD DISCUSSION)

4 (EXHIBIT 1, BOOKING MEDICAL SHEET, WAS MARKED
5 FOR IDENTIFICATION.)

6 BY MR. DARE: For the record, just so we'll
7 be certain we got Exhibit 1 marked, these are the
8 booking medical sheets that are Bates stamped JC29
9 and JC30.

10 Q. Is there a policy or procedure for handling
11 persons that have been identified to have medical problems?

12 A. I really don't know the policies and
13 procedures.

14 Q. Well, my question is is there one or do you
15 know if there's one?

16 A. I don't know.

17 Q. All right. In order to get the job that you
18 have, did you have to have any special training in order --

19 A. No, sir, I did not have to have any special
20 training.

21 Q. Okay.

22 BY MR. DARE: And also so the record is
23 clear, make sure he's finished his question before
24 you jump in. I know, most people have a bad habit of
25 doing that. The other reason for doing that is

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1 Q. And who's supposed to put the information in
2 your box?

3 A. The booking officer.

4 Q. What form would that information take? When I
5 say that, is it a document that somebody fills out or do
6 they make notes or something and leave in your box? What
7 exactly do they leave in there?

8 A. There is a medical sheet that they do it on the
9 computer and then put it in the box.

10 Q. This is 029 and 030. I hand you this document
11 and ask you to compare it and see if that's the same
12 document?

13 A. I'm sorry, I didn't hear.

14 Q. I was asking you to compare it to see if that's
15 the same document.

16 A. No. That's not the same document.

17 Q. Okay. What's the difference?

18 A. This is a medical questionnaire; this is the
19 booking sheet.

20 Q. Okay. Do you see the booking sheet?

21 A. Right here.

22 Q. I mean, I know you see it in front of you, but
23 I'm asking do they provide you with a copy of the booking
24 sheet?

25 A. No, sir. And then that goes with this one.

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1 because you don't know what he would finish up his
2 question with.

3 BY THE WITNESS: Okay.

4 Q. You don't know if the sheriff's department has
5 a procedure as to how inmates that have medical problems
6 should be handled?

7 A. Right, I'm not sure.

8 Q. Okay. How do you determine how you handle
9 inmates with medical problems?

10 A. When I see the booking sheet, the medical
11 booking sheet, I go and look and see what's going on with
12 them, what they've told the officers.

13 Q. And then what do you do?

14 A. And then I talk to the inmates to find out what
15 their medical problems are.

16 Q. After you see the medical booking sheet, how
17 long after then do you talk to the inmate?

18 A. As soon as I can get back to where they are.
19 If they're on Hall 1, I can talk to them there, if not I
20 have to go to the cells.

21 Q. Do you talk to them on the same day or the next
22 day or what? Do you talk to them the same day you receive
23 the booking sheet or do you talk to them on the next day?

24 A. Usually the same day.

25 Q. And what is the purpose for your talking to the

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1 inmates?

2 A. To get information to find out what's wrong
3 with them.4 Q. And once you get the information, what do you
5 do with it?6 A. If they're on medicine I try to get their
7 medication.8 Q. How do you go about trying to get the
9 medication?10 A. Call on their family or making sure that they
11 get a phone call so they can call their family to get it.12 Q. Do you record anywhere what occurred in your
13 interview with the inmate?

14 A. No, sir, not usually.

15 Q. Okay. You say not usually. I assume that
16 there are circumstances in which you do it?17 A. If I talk to them and they need their
18 medication, they're entitled to one call whenever they get
19 through being booked in, and I tell them that when they get
20 their call to make sure that they get their medicine or
21 I'll call and get it. Did I answer your question?

22 Q. Yeah.

23 BY MR. SANDERS: Can we go off the record for
24 a second.

25 (TELEPHONE INTERRUPTION.)

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1 yes.

2 Q. You do that every time you talk to the inmate?

3 A. Not every time.

4 Q. How do you decide when you're gonna put
5 something in versus not putting it in?

6 A. I don't know.

7 Q. There is no set procedure whereby you have to
8 put in certain things, is there?

9 A. No, sir.

10 Q. Now, once you interview the inmate and you
11 determine that they need medication, you tell them to talk
12 to the family, is that correct, or you talk to the family,
13 is that correct?

14 A. Yes.

15 Q. And sometimes you put this information in the
16 activity form?

17 A. Yes.

18 Q. And sometimes you contact the pharmacy to
19 determine the prescriptions that the individuals have?20 BY MR. DARE: Object to the form. You can
21 answer.

22 BY THE WITNESS: Sir?

23 BY MR. DARE: You can answer. I was just
24 objecting to the form of the question.

25 BY THE WITNESS: Yes.

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1 Q. (By Mr. Sanders) You say you ask them to call,
2 and if they are not successful, they don't get the
3 information, what do you do then?4 A. If they don't get to their family to pick up
5 the medicine?

6 Q. Right.

7 A. I tell them to get up-to-date medicine. If
8 it's at the pharmacy, I'll call the pharmacy to see if they
9 have medication there. We have picked up medication for
10 inmates before.11 Q. Now, if you make a call -- well, do you ever
12 call the inmates' families?

13 A. Yes, sir.

14 Q. When you make your calls, is there a place that
15 you make a notation that you made the call?

16 A. In the activities on the computer.

17 Q. Is that what it's called, activity?

18 A. Uh-huh.

19 Q. Is a hard copy generated?

20 BY THE WITNESS: Do you know what --

21 BY MR. DARE: Generally speaking.

22 BY THE WITNESS: That is an activity sheet.

23 Q. Is there one for each time that you have an
24 encounter with the inmate?

25 A. Yes, sir. When I put them in the activities,

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1 Q. If you make a contact with the pharmacy, is
2 that entered on the activity sheet?

3 A. Not all the time.

4 Q. If you make a contact with the detainee's
5 family, is that entered on an activity sheet?

6 A. Not all the time.

7 Q. Now, is the only reason that you interview the
8 detainee is to determine whether or not they need
9 medication?10 A. No, sir. When I talk to them it's to get their
11 medication that they're on and to find out about their
12 office visits, doctor's visits.13 Q. Is that to determine what doctor was treating
14 them before they came in?

15 A. Yes, sir.

16 Q. Do you also determine what their problems or
17 complaints are?

18 A. Complaints, yes, sir.

19 Q. Now, once you determine the treating
20 physicians, what do you do with that information?21 A. If everything is up to date, their
22 prescriptions and all, then I follow the doctor's orders as
23 far as when to give them their medicine.24 Q. Okay. You make contact with the doctor to see
25 if -- I'm not trying to put words in your mouth, I'm just

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1 trying to understand the step-by-step process. You contact
2 the doctor's office for what reason?

3 A. If I contact the doctor's office it's to find
4 out when they have follow-up appointments, to get refills
5 if they need them.

6 And I don't contact every doctor when they come in
7 and say that they have a certain doctor. If their
8 medications are up to date and everything, then I don't
9 have to contact that doctor.

10 Q. Now, if the meds are not up to date, then you
11 would contact the doctor?

12 A. Yes, I will try.

13 Q. If the doctor issues a prescription after you
14 contact him, do you play any role in terms of getting it
15 filled?

16 A. We get the prescription to a pharmacist and,
17 yes, we get it filled.

18 Q. Okay. Now, is there any other reason that you
19 talk to the inmates other than medication related?

20 A. I see the inmates everyday. They will come to
21 talk to me some time, no special reason.

22 Q. I understand. What I'm saying is, once you get
23 your medical booking sheet and you say you talk to them
24 about medication, is it any other reason that you interview
25 them other than to discuss medication?

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1 BY THE WITNESS: Yes.

2 Q. Okay. So it's based upon your interview that
3 you bring the matter to the attention of the captain or the
4 major that they need to go see a physician, is that right?

5 A. Okay, yes.

6 Q. And you recommend to them, you say this guy or
7 this lady needs to see a physician?

8 A. Yes.

9 Q. Do you ever make a decision that someone needs
10 to see a physician without that individual requesting to
11 see the physician?

12 A. I'm sorry, say that one more time, please.

13 Q. All right. Based upon your interview and
14 review of the medical records sheet, do you ever make a
15 recommendation that a detainee see a physician even though
16 the detainee has not requested a physician?

17 A. Yes.

18 Q. What would be instances where you would do
19 that?

20 A. If he is having signs and symptoms of a
21 problem.

22 Q. Would the nature of the illness have anything
23 to do with your making the decision to send them to a
24 physician?

25 A. Are you asking just by looking at this?

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1 A. No.

2 Q. Do you ever play a part in the inmates being
3 taken to the doctor?

4 A. Yes, sir.

5 Q. Tell me about that.

6 A. If they're having medical problems, if they're
7 complaining of pain or discomfort, having symptoms of
8 problems.

9 Q. Okay. Are you the one that makes the decision
10 as to whether or not someone goes to see a physician?

11 A. If I see that somebody needs to go, I will
12 contact the major or the captain and we will get them to
13 the doctor.

14 Q. Okay. But it's done on your recommendation?

15 A. Not just mine.

16 Q. Does the major interview the detainees, the
17 medical detainees?

18 A. No, I wouldn't think so.

19 Q. Does the captain interview them?

20 A. No.

21 Q. So it would be fair to say that you're the only
22 person that interview them?

23 A. Right.

24 BY MR. DARE: Related to medical reasons?

25 BY MR. SANDERS: Medical reasons, yeah.

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1 Q. Well, looking at that and talking to the
2 detainee.

3 A. If he's having symptoms or signs that I think
4 he needs to go to the doctor for right then, I would want
5 him to go. I would tell him that I needed him to go.

6 Q. I understand that. What I'm saying is, will
7 the kind of illness that the person has, even without signs
8 and symptoms, cause you to feel that that person needed to
9 go to the doctor?

10 A. No, sir.

11 Q. So the kind of illness has nothing to do with
12 it, that alone has nothing to do with it?

13 BY MR. DARE: Object to the form. Do you
14 understand the question?

15 BY THE WITNESS: If he puts on here that he
16 has a certain problem but he has no complaints, no,
17 sir.

18 Q. Okay. Without complaints you don't go to the
19 doctor?

20 A. Right, unless you have a follow-up visit.

21 Q. Do you have something called sick call?

22 A. Yes.

23 Q. Tell me about that, what is that?

24 A. It's a form that they fill out if they have a
25 problem.

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BY MR. DARE: Did I give you the sick call form?

BY THE WITNESS: That's it.

Q. All right. Let me look at it a second. Okay. I hand you -- is that the sick call document?

A. Yes, sir.

BY MR. SANDERS: Could we have that marked as Exhibit 2.

(EXHIBIT 2, SICK CALL REQUEST FORM, WAS MARKED FOR IDENTIFICATION.)

Q. Who fills that form in?

A. The inmates.

Q. And where do they get those from?

A. From the officers.

Q. They have to request it?

A. Yes.

Q. Okay. Once those forms are filled out, what happens next?

A. They are put in my box in central control office and I get them from there.

Q. And what do you do with them?

A. I read them and go back to whatever their complaint is, I go back and talk to them.

Q. Do you file those somewhere?

A. Yes, sir, I have them, I keep them.

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A. Yes.

Q. What is the purpose of talking to the inmate?

A. Just to go over this, find out what is wrong with them.

Q. Are the inmates examined by a physician on a regular basis?

A. No, sir.

Q. Would it be correct to say that the inmates do not see a physician unless they make complaints?

A. Yes, sir.

Q. Now, I don't know if I asked you this: when you talk to the inmates or the detainees during the sick call process, do you make any notes anywhere other than on Exhibit 2? Well, let me ask you: Do you make any notes on Exhibit 2?

A. Yes, sir.

Q. And do you make any notes anywhere else?

A. No, sir.

Q. So if an inmate went to sick call they would have to fill out that form, number 2, or Exhibit No. 2, is that right?

A. Yes, but I also get sick calls on any piece of paper. If they don't have a form and the officers didn't get it in there quick enough, they will write it on any paper.

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Q. And where do you keep them?

A. In my office.

Q. Is it filed under the inmate's name or is it filed by date or how is it?

A. I file bimonthly, by the month.

Q. And year?

A. Yes.

Q. And how long do you retain them?

A. I have them as far back as I've been there, 2008.

Q. Okay. So once you get that document, you look at the medical intake form?

A. Yes.

Q. And what the comparative?

A. Right.

Q. Where do you keep the medical intake, which is Exhibit 1, the booking medical sheet?

A. Okay. This is on the computer; so I can just pull it up on the computer.

Q. So you don't maintain a hard copy of that?

A. Right.

Q. But you do maintain a hard copy of Exhibit 2?

A. Yes, sir.

Q. As a result of the sick call sheet, do you speak with the inmate?

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Q. Let's say you talk to the person and you decide that you're gonna recommend that they go to the doctor or a particular physician, do you make a notation on the sick call form or whatever form it is that reaches you?

A. Yes, sir.

Q. So anytime anybody went to the doctor, there would be a notation on there by you recommending that they go, is that correct? And when I say on there, I mean the sick call form or piece of paper or whatever it is.

A. Yes, but I may have missed a few writing a note on there.

Q. Generally, it would be on there?

A. Generally, yes.

Q. All right. Directing your attention to on or about November the 10th, 2009. Did you receive Exhibit 1 in connection with Albert Graham?

A. No, sir.

Q. You never received that?

A. No, sir.

Q. How can you be certain?

A. I am pretty sure that I did not receive this.

Q. Okay. Well, you're looking at the medical intake sheet for Albert Graham?

A. Yes, sir.

Q. It reflects that he was booked in on November

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21

1 the 10th, is that correct, 2009?

2 A. Yes.

3 Q. What makes you so certain that you did not
4 receive it?

5 A. Because I do not remember talking to him right
6 after he was booked in.

7 Q. Did there come a time when you talked to him?

8 A. Yes, sir.

9 Q. And when was that?

10 A. Probably weeks after he was there.

11 Q. Who was the person that booked -- do you know a
12 Christopher Hillman?

13 A. Yes, sir. He was a sergeant at the jail at one
14 time.

15 Q. Where is he now?

16 BY MR. DARE: If you know.

17 BY THE WITNESS: No, sir, I don't know.

18 Q. When was the last time you saw him?

19 A. Probably a couple of years ago.

20 Q. What was he doing at that time?

21 A. He was at Taco Bell one day.

22 Q. When was the first time that you saw that form
23 which is Exhibit 1?

24 A. I don't know.

25 Q. Did you see it during 2009?

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1 Q. Well, did you go and talk to him?

2 A. I'm sure I did.

3 Q. What evidence do you have that you talked to
4 him?

5 A. None.

6 Q. You didn't make any notations that you talked
7 to him?

8 A. No, sir, not the first time I talked to him,
9 no, sir.

10 Q. Well, when was the first time you talked to
11 him?

12 A. I don't remember.

13 Q. Do you have a listing -- what is cell A160?

14 A. A160 is the medical cell.

15 Q. And are you familiar with the people who are
16 generally in A160?

17 A. Yes, sir.

18 Q. And do you see them on a daily basis?

19 A. Yes, sir.

20 Q. You see all of them on a daily basis?

21 A. Yes, sir.

22 Q. Why is it that you see them on a daily basis?

23 A. Because I go to that cell everyday. I stand at
24 the door. I can see into the cell.

25 Q. The persons in A160, are they there because

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1 A. Yes, sir. I go to every cell everyday but I
2 don't --

3 BY MR. DARE: And he was asking you if you
4 saw this form as Exhibit 1 in the year of 2009.

5 BY THE WITNESS: I'm sorry, I misunderstood
6 you. Yes, I would have seen this form because I
7 pulled it up on the computer.

8 Q. Did you see it during the month of November of
9 2009?

10 A. I don't remember seeing it.

11 Q. Did you see it during December of 2009?

12 A. I don't remember when I first saw it.

13 Q. When you first saw Exhibit 1, did you do
14 anything in connection with it?

15 A. I don't remember.

16 Q. You don't remember?

17 A. No, sir.

18 Q. When you saw it, did you read it?

19 A. Yes, sir.

20 Q. And at the time that you saw it you realized
21 that you had not seen it before?

22 A. I'm sure.

23 Q. And it did not cause you to take any action?

24 A. Well, I would have gone and talked to Mr.
25 Graham.

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1 they receive medication?

2 A. Yes, sir.

3 Q. The first time that you saw Mr. Graham, was he
4 in A160?

5 A. No, sir.

6 Q. Where was he?

7 A. I think it was 102, A102.

8 Q. And what is A102?

9 A. Just a regular cell.

10 Q. Do you have records that will indicate when Mr.
11 Graham was transferred to A106?

12 A. Yes, sir. That should be in the activities.

13 Q. Okay. Would you look at the transfer sheet.
14 When does it reflect that Mr. Graham was transferred to the
15 medical cell?

16 BY MR. DARE: Object to the form.

17 BY THE WITNESS: March the 10th --

18 BY MR. DARE: I'm just objecting to the form
19 of the question. You can answer.

20 BY THE WITNESS: March the 10th, 2010.

21 Q. Can you tell what caused him to be transferred?

22 A. He was put on medication and he went to see the
23 doctor.

24 Q. He was put on medication?

25 A. Yes, sir.

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1 Q. And he went to see the doctor.

2 BY MR. SANDERS: I would like to have that
3 marked as an exhibit.

4 (EXHIBIT 3, ACTIVITY SHEET, WAS MARKED FOR
5 IDENTIFICATION.)

6 Q. Did you talk to Mr. Graham before he was
7 transferred to A106?

8 A. Before he was transferred to 160?

9 Q. Yeah, A160. I'm sorry.

10 A. Yes, sir.

11 Q. And where did you talk to him?

12 A. It would be A102.

13 Q. And how many days before his transfer did you
14 talk to him?

15 A. Sir, I don't know.

16 Q. Was it a week before?

17 A. I don't know.

18 Q. Did your conversation with Mr. Graham have
19 anything to do with his being transferred?

20 A. Him being put on medicine is why he was
21 transferred to that cell.

22 Q. Well, did your conversation with Mr. Graham
23 have anything to do with his being put on medicine?

24 A. I'm sure, yes, sir.

25 Q. What was the conversation about?

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1 22nd.

2 Q. You took his blood pressure on February the
3 22nd, okay. So that means that you -- well, what caused
4 you to take his blood pressure on February 22nd?

5 A. I don't remember. He may have asked me to. I
6 don't remember.

7 Q. What was his blood pressure at that time?

8 A. 140/90.

9 Q. And how is that, is that good?

10 A. Borderline, a little bit high.

11 BY MR. SANDERS: I would like to have that
12 marked as an exhibit.

13 (EXHIBIT 4, MEDICAL NOTES, WAS MARKED FOR
14 IDENTIFICATION.)

15 (EXHIBIT 5, MEDICAL NOTES, WAS MARKED FOR
16 IDENTIFICATION.)

17 (EXHIBIT 6, MEDICAL NOTES, WAS MARKED FOR
18 IDENTIFICATION.)

19 Q. All right. Now, if you took his blood pressure
20 on February the 22nd, you would have seen Exhibit 1 before
21 you took his blood pressure, is that correct?

22 A. Yes, sir.

23 Q. And you're not certain why you went and took
24 it?

25 A. No, sir. He may have asked me to. I really

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1 A. It would have been about his medical problems.

2 Q. About his medical problems?

3 A. Yes, sir.

4 Q. Now, why were you discussing his medical
5 problems with him?

6 A. Mr. Graham never complained to me. I don't
7 remember what led up to me talking to him other than seeing
8 the sheet, the medical sheet.

9 Q. So you saw the medical sheet at some point?

10 A. Yes, sir.

11 Q. And as a result of that you went and talked to
12 Mr. Graham?

13 A. Yes, sir.

14 Q. How long after you saw the medical sheet did
15 you go and talk to him?

16 A. I don't remember.

17 Q. Was it the next day?

18 A. It's possible, but I don't remember.

19 Q. Was it the same day?

20 BY MR. DARE: I'm gonna object to the form.

21 It's asked and answered. I'm objecting to the form
22 because you've now said you don't remember twice.

23 Q. Do you have any notes or anything that would
24 help you recall?

25 A. Where I took his blood pressure on February the

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1 don't remember.

2 Q. And you don't know how soon after you saw
3 Exhibit 1 that you took his blood pressure?

4 A. Right.

5 Q. On Exhibit 4 there is a notation 2-23. Does
6 that relate to Mr. Graham, at the bottom?

7 A. No, sir.

8 Q. Okay. All right. Would you look at Exhibit 5.
9 Does that relate to Mr. Graham?

10 A. The blood pressure.

11 Q. Was there a test done? Would you read what it
12 says.

13 A. Mr. Graham's blood pressure is about the middle
14 of the sheet.

15 Q. Okay. Tell me about that.

16 A. I checked his blood pressure on March the 9th.
17 Mr. Graham's blood pressure was 140/82.

18 Q. And is that good?

19 A. Yes, sir.

20 Q. Did he have any complaints at that time?

21 A. No, sir.

22 Q. And he was still in the general population?

23 A. Yes, sir.

24 Q. Would you look at Exhibit 6. What does that
25 relate to? What date did you see Mr. Graham?

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1 A. March the 31st.
 2 Q. And what was the reason for seeing him?
 3 A. What was the reason I took his blood pressure?
 4 Q. Yeah.
 5 A. Just took it.
 6 Q. No reason?
 7 A. I don't remember any reason.
 8 Q. Okay. Now, Exhibits 4, 5 and 6, what are they?
 9 A. Just some notes that I kept.
 10 Q. And where do you keep these?
 11 A. I kept them in a notebook.
 12 Q. Does that notebook reflect all encounters that
 13 you had with Mr. Graham?
 14 A. I couldn't find anything else on Mr. Graham
 15 when I was looking.
 16 Q. And where do you keep this notebook?
 17 A. They're in my office.
 18 Q. And do you keep a note of every contact that
 19 you make with inmates?
 20 A. No, sir.
 21 Q. Now, you cannot tell me when you first saw
 22 Exhibit 1, is that correct?
 23 A. Right.
 24 Q. If you had seen Exhibit 1 on the day that Mr.
 25 Graham was booked into the facility, what would you have

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1 A. Yes, sir.
 2 Q. Now, it also indicated that he was on a
 3 medication, didn't it?
 4 A. Yes, sir.
 5 Q. And what was that medication?
 6 A. It says Corad.
 7 Q. Do you know what that was? It was Coreg,
 8 wasn't it?
 9 A. Coreg, probably.
 10 Q. Did you associate that with a medication that
 11 one who has congestive heart failure would be given?
 12 BY MR. DARE: Object to form.
 13 Q. Do you know if that's a medication that a
 14 person with congestive heart failure might be given?
 15 A. I know that that is a medication for someone
 16 with a heart condition.
 17 Q. And based upon this you knew that Mr. Graham
 18 had a heart condition?
 19 A. Yes.
 20 Q. In fact, when he was processed in he indicated
 21 he had a heart condition, did he not?
 22 A. Yes.
 23 Q. And he indicated that he was on disability?
 24 A. Yes.
 25 Q. And he indicated that he was borderline

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1 done?
 2 A. I would have talked to him.
 3 Q. What reason, why would you have talked to him?
 4 A. Because it says that he has some medical
 5 problems and it says that he takes medication.
 6 Q. And he had some serious medical problems,
 7 didn't he?
 8 BY MR. DARE: Object to the form of the
 9 question to the extent that it calls for a legal
 10 conclusion notwithstanding or even a medical
 11 conclusion. Notwithstanding that fact you can answer
 12 to the extent you can.
 13 Q. He had some serious medical problems, didn't
 14 he?
 15 BY MR. DARE: Same objection. You can
 16 answer.
 17 BY THE WITNESS: I think so.
 18 Q. Congestive heart failure, do you know what that
 19 is?
 20 A. Yes, sir.
 21 Q. What is it?
 22 A. It is because of the fluid around the heart.
 23 Doctors normally put someone on a fluid pill for congestive
 24 heart failure. The heart is not pumping right.
 25 Q. And that's a serious matter, isn't it?

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1 hypertensive, didn't he?
 2 A. Yes.
 3 BY MR. DARE: Object to the form.
 4 Q. Okay. And once you read Exhibit 1 you knew
 5 this, right?
 6 A. Yes.
 7 Q. Knowing this -- assume that you knew this on
 8 November the 10th, what would you have done other than talk
 9 to Mr. Graham?
 10 A. On November the 10th?
 11 Q. Yes, ma'am.
 12 A. Talk to him, found out who his doctor was, what
 13 medications he's on.
 14 Q. You would talk to him and find out his
 15 physician and his meds?
 16 A. Yes.
 17 Q. Did you ever talk to him and find out who his
 18 physician was and --
 19 A. I tried.
 20 BY MR. DARE: He was still asking his
 21 question.
 22 BY THE WITNESS: Oh, I'm sorry. That's where
 23 that can't hear good comes in. I'm sorry.
 24 Q. Did you ever talk to Mr. Graham about his meds
 25 and his physician once you received the information that's

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1 contained in Exhibit 1?

2 A. I'm sure I did.

3 Q. Do you know if you did?

4 A. Yes, sir.

5 Q. But you don't know when it was?

6 A. Right.

7 Q. And what did he tell you?

8 A. When he was booked in he did not know his

9 doctor.

10 Q. How do you know that?

11 A. Because it says it. He says he doesn't have a
12 doctor.

13 Q. Did you ask him if he had a doctor, if he knew
14 his doctor?

15 A. I'm sure I did.

16 Q. But you don't know what he told you?

17 A. I don't remember.

18 Q. You don't know if he told you his physician's
19 name or the medication he was taking?

20 A. I don't remember that.

21 Q. Did you contact Odell Graham?

22 A. No, sir.

23 Q. Why not?

24 A. I don't know.

25 Q. And you told me earlier that one of the things

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1 Q. Well, Mr. Graham had been there for three
2 months or better than three months and he had not been
3 interviewed by you, is that correct?

4 A. I'm not sure.

5 Q. Well, he had been there at least two months and
6 hadn't been interviewed by you, isn't that correct?

7 A. I don't remember when I talked to him the first
8 time.

9 Q. Well, you will agree with me that you talked to
10 him before February the 22nd?

11 A. Okay. I probably did.

12 Q. And you have no indication that even on
13 February the 22nd that you tried to determine who his
14 physician was, is that right?

15 A. I don't remember when I talked to him or
16 anything.

17 Q. Well, you will agree with me, will you not,
18 that on February the 22nd that you were armed with the
19 information that he had congestive heart failure, that he
20 was borderline hypertensive and he had a heart condition
21 and he was disabled and that you did nothing on February
22 22nd to try to determine who his physician was?

23 A. I don't remember if I made calls to the doctors
24 or I don't remember what I did.

25 Q. Do you have anything that would indicate that

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1 you do is contact the relatives of the person to find out
2 the medication they were on, is that correct?

3 A. For the family to help me get the medication,
4 yes.

5 Q. But you didn't do it in Mr. Graham's case, is
6 that correct?

7 A. No, sir, I don't remember that I did that.

8 Q. You don't remember doing that?

9 A. Right.

10 Q. Did Mr. Graham qualify based upon Exhibit 1 to
11 be placed in cell block A160?

12 A. Yes, sir, he could have been put in there.

13 Q. Did you request that he be transferred there
14 once you saw that?

15 A. No, sir.

16 Q. And we have to assume that you saw it sometime
17 before February the 22nd, 2010, is that correct?

18 A. Yes, sir.

19 Q. Did it bother you that he had these medical
20 conditions and nothing had been done to try to determine
21 the name of his physician or the medication that he was
22 taking during the month of November, December or January?

23 A. You asked if it bothered me?

24 Q. Yeah.

25 A. I want all of them to get help.

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1 you did do it?

2 A. No, sir.

3 Q. It didn't alarm you that he had been in --
4 well, strike that. Look at Exhibit 1. Doesn't Exhibit 1
5 indicate that Mr. Graham was on medication prior to coming
6 into the detention facility?

7 A. Yes.

8 Q. As a nurse did it not concern you that he had
9 been in there the month of November, the month of December,
10 the month of January and at least half of February and he
11 had not received any medication?

12 A. Yes, it concerned me.

13 Q. Did it concern you enough on the 22nd to try to
14 send him to a doctor. And when I say the 22nd I mean the
15 22nd of February.

16 A. I don't remember.

17 Q. You don't remember whether it concerned you?

18 A. I'm sure it concerned me.

19 Q. Well, you will agree that you did not send him
20 to a doctor?

21 A. Yes.

22 BY MR. DARE: On February 22nd.

23 Q. On February 22nd?

24 A. Yes.

25 Q. Are you familiar with the Hattiesburg Clinic?

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- 1 A. Yes.
- 2 Q. Do they have cardiologists there?
- 3 A. Yes.
- 4 Q. Did you make any effort to try to find out if
- 5 he was a patient there?
- 6 A. I'm sure that I asked him.
- 7 Q. And what did he tell you?
- 8 A. I don't remember. Evidently he didn't tell me
- 9 nothing. He said he didn't have a physician.
- 10 Q. I'm not talking about what he said when he was
- 11 booked in. I'm talking about armed with the information
- 12 that you had, did you make any effort to try to find out
- 13 who his physician was as of February the 22nd, 2010?
- 14 A. I don't think so.
- 15 Q. Okay.
- 16 A. I don't remember, but I don't think so.
- 17 Q. Okay. Now, did you make any effort to try to
- 18 determine what medication he was on prior to February the
- 19 22nd, 2010?
- 20 A. I don't remember that.
- 21 Q. Is there a medication called Corad?
- 22 A. There is one called Coreg. I don't know that
- 23 there's one called Corad.
- 24 Q. When you saw Exhibit 1 and it had Corad, did it
- 25 dawn on you that that was a typographical error?

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- 1 A. Yes, sir.
- 2 Q. And did you call any pharmacist to see if he
- 3 had had any prescriptions filled there?
- 4 A. No, sir, I do not think I did.
- 5 Q. Are there other cardiologists in Laurel that
- 6 you are aware of other than at the Hattiesburg Clinic?
- 7 A. Yes, sir.
- 8 Q. Did you contact their office?
- 9 A. No, sir.
- 10 Q. Did you contact the county hospital to see if
- 11 he had been treated there?
- 12 A. No, sir, I do not think I did.
- 13 Q. Now, did there ever come a time when Mr. Graham
- 14 went to the hospital?
- 15 A. Mr. Graham went to Ellisville Medical Clinic.
- 16 Q. When did he go?
- 17 A. March the 10th.
- 18 Q. Okay. I hand you the document. What is that
- 19 document?
- 20 A. This is a medical treatment form.
- 21 Q. And who filled that in?
- 22 A. I did.
- 23 Q. And what does it say?
- 24 A. It gives the date, Mr. Graham's name, the cell
- 25 that he was in, B102, adult detention facility inmate,

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- 1 county inmate, it gives the complaint.
- 2 Q. Read the complaint.
- 3 A. Read the complaint?
- 4 Q. Yes, ma'am.
- 5 A. Complaints of elevated blood pressure.
- 6 Q. Did you take his blood pressure?
- 7 A. I took it on the 9th, March 9th.
- 8 Q. Was it elevated on the 9th?
- 9 A. No, sir, 140/82.
- 10 Q. Did Mr. Graham fill out a sick call?
- 11 A. No, sir.
- 12 Q. How did you get to filling out -- well, let's
- 13 have that marked.
- 14 (EXHIBIT 7, MEDICAL TREATMENT FORM, WAS
- 15 MARKED FOR IDENTIFICATION.)
- 16 Q. How did you get to filling out Exhibit 7?
- 17 A. Sometimes when I go to the cells they will just
- 18 tell me things. I don't remember if that's what happened.
- 19 The inmates will just come to me and tell me things. I
- 20 don't remember how this came about, but.
- 21 Q. Well, did you take his blood pressure on the
- 22 10th?
- 23 A. I don't have documentation of it.
- 24 Q. But you have documentation for the other days?
- 25 A. Yes, sir, for the 9th.

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- 1 Q. You feel like it was important to document his
- 2 blood pressure?
- 3 A. Yes, sir.
- 4 Q. And on the 9th his blood pressure was fine,
- 5 right?
- 6 A. Yes.
- 7 Q. But you documented that?
- 8 A. Yes, sir.
- 9 Q. On the 10th according to the form that you
- 10 filled out he had an elevated blood pressure?
- 11 BY MR. DARE: Object to the form. You can
- 12 answer.
- 13 BY THE WITNESS: He complained of an elevated
- 14 blood pressure.
- 15 Q. Well, did you verify his complaint?
- 16 A. No, sir.
- 17 Q. And that's your writing in there?
- 18 A. Yes, sir.
- 19 Q. Isn't that one of the things that you do when
- 20 complaints are made to determine whether or not they are
- 21 legitimate?
- 22 A. Yes, sir.
- 23 Q. And the way you would determine that was by
- 24 taking the blood pressure?
- 25 A. Yes, sir.

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1 Q. But you didn't do it in this instance?

2 A. Right, yes, sir.

3 Q. But you sent him to the doctor?

4 A. Yes, sir.

5 Q. And he was still in the general inmate
6 population at that point?

7 A. Yes, sir.

8 Q. So you will agree with me that up to March the
9 9th, 2010 that Mr. Graham had not received any medication?

10 A. Yes, sir.

11 Q. And he had not seen a doctor?

12 A. Yes, sir.

13 Q. And the date on Exhibit 7 is what, the 10th?

14 A. Yes, sir.

15 Q. Did you talk to Mr. Graham on that day?

16 A. Yes, sir.

17 Q. Do you know what he told you?

18 A. He stated that he hasn't been on meds for over
19 a year.

20 Q. You put that on the form?

21 A. Yes, sir.

22 Q. Did that bother you?

23 A. That I put it on here or that he hadn't been on
24 meds?

25 Q. No, that he hadn't been on meds for a year.

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1 Q. Did you do that pursuant to a medical
2 authorization from Mr. Graham?

3 A. Yes, I did.

4 Q. And when did that happen?

5 A. I don't remember.

6 Q. You have documents 836 and 837. Do you
7 recognize those?

8 A. Yes, sir.

9 Q. Document 836, what is that?

10 A. Okay. This is an authorization to disclose
11 health information.

12 Q. And who is it signed by?

13 A. It is signed by Mr. Graham.

14 Q. And what is the date on that?

15 A. February the 17th, 2010.

16 Q. So would it be fair to say that you had talked
17 to Mr. Graham about his condition at least on February the
18 17th or earlier?

19 A. Yes, sir.

20 Q. And on February the 17th you knew that Mr.
21 Graham had been going to the heart clinic?

22 BY MR. DARE: Object to form. You can
23 answer.

24 BY THE WITNESS: Yes.

25 Q. Did you call the heart clinic at any time?

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1 A. Yes, sir, it does.

2 Q. Did you ask him at that point where he bought
3 his medication from?

4 A. I don't remember.

5 Q. And you understood that with congestive heart
6 failure and having been on Coreg that going without
7 medication that long was problematic?

8 BY MR. DARE: I'm gonna object to the form of
9 the question. This witness has not been qualified to
10 answer that question, and you are not to answer that
11 question.

12 Q. Are you there to attend to all the medical
13 needs of the prisoners?

14 A. I don't understand.

15 Q. Are you supposed to make a determination as to
16 whether or not the detainees need medical attention?

17 A. Yes, sir.

18 Q. Now, did it ever come to your attention that
19 Mr. Graham had been a patient at the heart clinic?

20 A. I don't remember.

21 Q. You don't remember?

22 A. I don't remember. I'm sure that we talked
23 about it.

24 Q. Did you ever request the medical records of --

25 A. Yes.

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1 A. I don't think it was called the heart clinic.
2 I think it was the Heart Care Center.

3 Q. All right. Well, did you call the Heart Care
4 Center?

5 A. I don't remember.

6 Q. If you had called them, would you have some
7 kind of notation to indicate it?

8 A. I'm sure I would have had.

9 BY MR. SANDERS: Now, let's have 0836 marked
10 as Exhibit 8.

11 (EXHIBIT 8, AUTHORIZATION, WAS MARKED FOR
12 IDENTIFICATION.)

13 (EXHIBIT 9, FAX, WAS MARKED FOR
14 IDENTIFICATION.)

15 Q. All right. Exhibit No. 8, would it be fair to
16 say that you had seen Exhibit No. 1 prior to February the
17 17th, 2010?

18 A. Yes, sir.

19 Q. And up in the left-hand corner of Exhibit 8
20 there's a fax number. Do you know what number that is?

21 A. March the 2nd, 2010?

22 Q. I'm talking about written in handwriting where
23 it says fax. Do you see where I'm talking about?

24 A. No, sir. I don't think I hear you.

25 Q. Okay, I'm sorry. You see this right here. Is

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1 that your handwriting?

2 A. Yes.

3 Q. And what fax number is that?

4 A. 425-5525.

5 Q. And what is that the number to?

6 A. The Heart Care Center, I'm pretty sure it is.
7 I don't remember exactly, but.

8 Q. So at least as of February the 17th you knew
9 that Mr. Graham was a patient at the Heart Care Center?

10 BY MR. DARE: Object to the form of the
11 question.

12 Q. Is that correct?

13 A. Yes, sir.

14 Q. Now, would you look at Exhibit No. 9. Did you
15 fax that on March the 2nd, 2010?

16 A. Yes.

17 Q. Tell me why you waited that span of time?

18 A. I don't remember.

19 Q. You knew that Mr. Graham had been in the
20 detention facility from November the 10th?

21 A. Yes.

22 Q. Up until February 17th, 2010, is that correct?

23 A. Yes.

24 Q. You knew that he had congestive heart failure,
25 is that correct?

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1 A. No, sir.

2 Q. You didn't feel that it was important for the
3 physician that was gonna be treating him to have his
4 medical records?

5 A. I knew that the doctor could get the medical
6 records probably quicker than I could.

7 Q. Where did you send them?

8 A. To Ellisville Medical Clinic.

9 Q. You knew that Ellisville Medical Clinic did not
10 have a cardiologist, didn't you?

11 A. Yes, sir.

12 Q. And you knew that Mr. Graham had congestive
13 heart failure or he indicated he had congestive heart
14 failure?

15 A. Yes, sir.

16 Q. You chose not to send him to the heart care
17 clinic, didn't you?

18 A. Yes, sir.

19 Q. You could have sent him there if you chose to
20 do so, isn't that correct?

21 A. In my opinion I could get him in quicker to
22 Ellisville Medical Clinic; wouldn't have to make an
23 appointment.

24 Q. You could have gotten him in quicker at the
25 emergency room at the hospital, could you not?

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1 BY MR. DARE: Object to the form. You can
2 answer if you knew that he had congestive heart
3 failure.

4 BY THE WITNESS: I knew that that's what he
5 said on his booking sheet.

6 Q. And you didn't have any reason to doubt it, did
7 you?

8 A. I can't think of any.

9 Q. But yet and still you waited until March the
10 2nd to fax the release to the Heart Care Center, is that
11 right?

12 A. Yes.

13 Q. Did you receive any medical records from the
14 Heart Care Center?

15 A. Yes, sir.

16 Q. When did you receive the medical records?

17 A. I don't remember. It would have been after
18 March the 2nd.

19 Q. It would have been after?

20 A. After I sent the authorization.

21 Q. So did you have his medical records when you
22 sent him to the doctor on March the 10th?

23 A. I think I did.

24 Q. Did you send those medical records to the
25 doctor?

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1 A. Yes.

2 Q. And the hospital was better equipped to deal
3 with someone that claimed they had heart failure than the
4 Ellisville Clinic, wasn't it?

5 BY MR. DARE: Object to the form of the
6 question. You can answer if you can.

7 BY THE WITNESS: Say the question again,
8 please.

9 Q. You're a nurse, is that correct?

10 A. Yes.

11 Q. You're familiar with the medical care
12 facilities in this area?

13 A. Most of them.

14 Q. And would it be fair to say that you are aware
15 that the Jones County Hospital was better equipped to deal
16 with someone who claimed to have congestive heart failure
17 than Ellisville Clinic?

18 BY MR. DARE: Object to the form. You can
19 answer if you can.

20 BY THE WITNESS: They are better equipped.
21 Q. You told me that you did not send the medical
22 records of Mr. Graham to the Ellisville Clinic. Did you
23 inform the personnel at the Ellisville Clinic of Mr.
24 Graham's complaints?

25 A. When I send this medical treatment with Mr.

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1 Graham to go to the doctor or any other inmate, I also send
2 this with them.

3 So when they go to the doctor they have both of
4 these, what their complaints is when they're booked in and
5 then what's going on when I send them to the doctor.

6 Q. There was nothing that you sent to the
7 Ellisville Clinic that would indicate that Mr. Graham had
8 been previously treated at the Heart Care Center, was
9 there?

10 A. No, sir.

11 Q. And there was nothing that you sent to the
12 Ellisville Clinic that would indicate the kind of
13 medication that Mr. Graham had previously had?

14 A. Just what Mr. Graham told us he was on, the
15 Coreg.

16 Q. Now, when you got the medical records from the
17 heart clinic, did you review those?

18 A. The best that I can remember I did.

19 Q. Did those records have in there medications
20 that Mr. Graham had taken and been prescribed?

21 A. Yes, it did.

22 Q. And were there a series of medications besides
23 Coreg that had been prescribed to him?

24 A. I think.

25 Q. And most of the medications were heart related,

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1 A. I don't remember that.

2 Q. Would it be fair to say that you did not
3 communicate to the Ellisville Clinic that he had been
4 prescribed these medications?

5 A. No, sir, I didn't.

6 Q. Okay. Look at 847 of Exhibit 10 under
7 impressions.

8 A. Okay.

9 Q. What are the impressions that are indicated?

10 A. (Reading) Nonischemic dilated cardiomyopathy;
11 mild renal insufficiency; status post congestive heart
12 failure; abnormal adenosine myoview study back in November
13 showing a large inferolateral defect but no ischemia. And
14 that is dated 1-24-08.

15 Q. Okay. Would you look at 845 of Exhibit 10?

16 A. Which one?

17 Q. The impressions.

18 A. Okay.

19 Q. What were the impressions?

20 A. (Reading) Acute left parietal stroke; history
21 of severe nonischemic cardiomyopathy with an ejection
22 fraction of 15 -- I can't read that.

23 Q. Okay. That's okay.

24 A. Okay. Mild renal insufficiency and history of
25 nonsustained ventricular tachycardia.

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1 were they not?

2 BY MR. DARE: Object to the form. You can
3 answer if you can.

4 BY THE WITNESS: I don't remember.

5 Q. Do you have those medical records with you?
6 (OFF-THE-RECORD DISCUSSION.)

7 (EXHIBIT 10, MEDICAL RECORDS, WAS MARKED FOR
8 IDENTIFICATION.)

9 Q. Would you look at Exhibit 10?

10 A. Yes, sir.

11 Q. Page 843 at the bottom?

12 A. Yes.

13 Q. Would you look at the diagnosis section. Okay.
14 would you indicate the medications that were prescribed?

15 A. Okay. Aspirin, 81 milligrams once daily; Coreg
16 6.25 milligrams one twice a day; Digitek 0.125 milligrams
17 once a day; Diovan 40 milligrams once a day; KCL 20
18 milliequivalents once a day; Lasix 40 milligrams twice a
19 day.

20 Q. And you received that information in the
21 medical records of Mr. Graham from the heart clinic, is
22 that correct?

23 A. Yes, sir.

24 Q. Did you try to find out from Mr. Graham where
25 those medications were purchased?

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1 BY MR. DARE: He just asked you to read the
2 admitting impressions.

3 Q. That's fine. Now, Mr. Graham had indicated
4 that he had congestive heart failure, correct?

5 A. Yes.

6 Q. That was corroborated by the medical records
7 that you received?

8 BY MR. DARE: Object to the form of the
9 question. You can answer if you can.

10 BY THE WITNESS: According to the records, it
11 says that he has status post congestive heart failure
12 on 1-24-08.

13 Q. Okay. He indicated on admissions that he had a
14 heart condition, right?

15 A. Yes.

16 Q. And that's born out by the medical records,
17 right?

18 A. Yes.

19 BY MR. DARE: Object to the form.

20 Q. He also indicated that he had had a stroke, is
21 that correct?

22 BY MR. DARE: In Exhibit 1?

23 BY MR. SANDERS: No, I mean in the medical
24 records. It's not in Exhibit 1, okay.

25 BY THE WITNESS: I don't see it in Exhibit 1.

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1 Q. Okay. He also indicated that he was taking
2 Coreg, is that right?

3 A. Yes.

4 Q. And that's born out in the records, right?

5 A. Yes.

6 Q. You had all this information but you still
7 didn't feel like it was necessary to convey it to the
8 Ellisville Clinic?

9 A. I did not send his records.

10 Q. And you didn't call and tell them, did you?

11 A. I'm sorry?

12 Q. You didn't call and tell them, tell the
13 Ellisville Clinic?

14 A. Not that I remember.

15 Q. Okay, all right. As a medical professional,
16 you understand that a history is an important part of the
17 medical treatment?

18 A. Yes.

19 Q. And the information that you had was a
20 reflection of his medical history, is that correct?

21 A. Yes.

22 Q. Was Mr. Graham transferred to A160 based upon
23 your recommendation?

24 BY MR. DARE: Object to form. I think it's
25 been asked and answered a couple of times now. You

Patricia Carol Johnston - 06-13-14

55

1 A. When he took his medications.

2 Q. And when did he start taking them?

3 A. He started taking them on the 11th.

4 Q. I see a series of signatures or?

5 A. Initials.

6 Q. Whose initials are they?

7 A. Those are mine.

8 Q. And did you personally give him the medication?

9 A. I gave him the medication except on the
10 weekends, and the officers would give it, and then I would
11 look at the records from the weekend to make sure that he
12 took them that day and then fill it in.

13 Q. So although you initialed all this, you didn't
14 personally see him take all of that?

15 A. On the weekends I did not.

16 Q. How many times did he take the medication?

17 A. From March 11th through the 31st and April the
18 1st through April the 5th.

19 Q. Okay. You will agree that Mr. Graham was not
20 seen by you within 24 hours after he was brought into the
21 adult detention facility?

22 A. Yes, sir.

23 Q. You will agree with me that Mr. Graham was not
24 given a physical examination within 14 days after he was
25 booked?

Patricia Carol Johnston - 06-13-14

54

1 can answer it again.

2 BY THE WITNESS: Probably, but I don't
3 remember.

4 Q. Would there be a document that would?

5 A. No, sir.

6 Q. Do you know what kind of medication was
7 prescribed at the Ellisville Clinic for Mr. Graham?

8 A. I know that it was a blood pressure medicine.
9 I do not remember the name.

10 Q. When did you become aware of the medication?

11 A. When they brought him back from the doctor or
12 from the Ellisville Clinic.

13 Q. And the form that you sent to them indicated a
14 complaint with respect to blood pressure, right?

15 A. Yes.

16 Q. And they gave him a blood pressure medication?

17 A. Yes.

18 Q. And nothing else. I hand you those two
19 documents and ask you if you can tell me what those are?

20 A. These are the medical administration records.

21 Q. Can you tell me what that document is?

22 A. It is a medical administration record.

23 Q. And whose is it?

24 A. This is Mr. Albert Graham.

25 Q. What does it reflect?

Patricia Carol Johnston - 06-13-14

56

1 A. Yes, sir.

2 Q. You will agree with me that he was not given a
3 physical examination within 90 days after he was booked?

4 A. Yes, sir.

5 Q. You will agree with me that once you saw Mr.
6 Graham's medical information sheet, which is Exhibit 1,
7 that he was not scheduled for the next sick call?

8 A. I didn't understand.

9 Q. Okay. After you saw Exhibit 1, you will agree
10 with me that Mr. Graham was not scheduled for the next sick
11 call?

12 A. No, sir.

13 Q. He was not?

14 A. Sick call, you mean to give him the form sick
15 call?

16 Q. Yeah. He was not scheduled for any medical
17 treatment within the next day or two?

18 A. No, sir.

19 Q. Were you present on April the 4th or 5th of
20 2010 when Mr. Graham became ill?

21 A. I know that I was there the day that he got
22 sick that night.

23 Q. Did you see him on the day that he became ill?

24 A. Yes, sir.

25 Q. Did you give him any medication on that date?

Patricia Carol Johnston - 06-13-14

57

1 You can look at the records. I believe you did.

2 BY MR. DARE: He was asking you about the 4th
3 and the 5th.

4 BY THE WITNESS: Yes, sir, he had his
5 medication.

6 Q. Okay. Did he indicate any complaints on that
7 day?

8 A. No, sir.

9 Q. Do you know what day of the week the 5th was?

10 A. No, sir.

11 Q. All right.

12 A. Not now.

13 BY MR. SANDERS: I think I'm just about done,
14 unless you've got some questions you want to ask.

15 BY MR. DARE: Sure. Through?

16 BY MR. SANDERS: I'm through. Thank you very
17 much.

18 EXAMINATION BY MR. DARE:

19 Q. Let's go first to Exhibit 10. Can you go to
20 page 847 for me, please, ma'am. Now, you were reading
21 earlier under the impressions, and under number 3 under
22 impressions, you see it has status post congestive heart
23 failure. What does the post there mean?

24 A. After.

25 Q. So the congestive heart failure had cleared up

Patricia Carol Johnston - 06-13-14

59

1 Q. I'm gonna go to Exhibit 8 now. Do you know on
2 what date you wrote fax 425-5525, do you know what date you
3 wrote that in there?

4 A. Probably the day that I faxed it.

5 Q. What date did you fax that document?

6 A. 3-2-10.

7 Q. Do you know what date you wrote the heart
8 clinic into this document?

9 A. February the 17th, 2010.

10 Q. And this is generally in 2009 and 2010. Did
11 you make rounds within the jail?

12 A. Yes, sir.

13 Q. In other words, did an inmate have to be in
14 A160 in order for you to see them?

15 A. No, sir.

16 Q. I'm not sure this was asked. In 2009 and 2010,
17 when did you work at the jail, what days of the week?

18 A. Monday through Friday, and I'm on call 24-7. I
19 make rounds in the jail everyday, Monday through Friday.

20 Q. What areas of the jail did you make rounds in?

21 A. All of them, from the kitchen to every hall,
22 men, women and the loop at least once a day, sometimes two
23 or three times.

24 Q. These may be some obvious questions. Are you a
25 cardiologist?

Patricia Carol Johnston - 06-13-14

58

1 according to this note?

2 BY MR. SANDERS: To which we object to the
3 form.

4 Q. Is that what post means?

5 A. Post means it's after.

6 Q. And what date is that document again?

7 A. 1-24-08.

8 Q. You were also asked to read a bunch of home
9 medications from JC843. What is the date of that document?

10 A. February the 5th, '08.

11 Q. Now, as of March 10th, 2010, had Mr. Graham
12 ever told you whether or not he had taken medication within
13 the prior year?

14 A. He stated that he had not taken any in over a
15 year.

16 Q. And he specifically told you that, is that
17 correct?

18 A. Yes, sir.

19 BY MR. SANDERS: Object to the form, leading.
20 Q. You were asked multiple times when the first
21 time that you saw Exhibit 1 is. I believe, and correct me
22 if I'm wrong, that your testimony was you don't know when
23 you first saw Exhibit 1, is that right?

24 A. Yes, sir.

25 BY MR. SANDERS: Object to form.

Patricia Carol Johnston - 06-13-14

60

1 A. No, sir.

2 Q. Are you a physician?

3 A. No, sir.

4 Q. As an LPN are you allowed to prescribe
5 medication?

6 A. No, sir.

7 Q. As an LPN are you allowed to administer
8 medication that has been prescribed in the past but which
9 is outdated?

10 A. No, sir.

11 BY MR. DARE: All right. Thank you. I have
12 no further questions at this time. We're done.

13 (CONCLUDED 12:39 P.M.)
14
15
16
17
18
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20
21
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24
25

JONES COUNTY ADULT DETENTION FACILITY

Booking Medical Sheet: 67209

11/10/09 9:51

ID #: 2006100853

Name: GRAHAM, ALBERT LEE

Address: [REDACTED]

LAUREL, MS 00000000

DOB: [REDACTED]

Race: B

Height: 6-1

Eyes: BRO

Home Phone

Age: 58 YRS

Sex: M

Weight: 170

Hair: BLK

(601)000-0000

Soc. Sec. No.: [REDACTED]



Yes/No

VISUAL ASSESSMENT

- N 1. Is inmate unconscious?
- N 2. Does inmate have any visible signs of trauma, illness, obvious pain or bleeding, requiring immediate medical attention?
- N 3. Is there obvious fever, swollen lymph nodes, jaundice or other evidence of infection that may be contagious?
- N 4. Any signs of poor skin condition, vermin, rashes or needle marks?
- N 5. Does inmate appear to be under the influence of drugs or alcohol?
- N 6. Any visible signs of alcohol or drug withdrawal?
- N 7. Does inmate's behavior suggest the risk of suicide or assault?
- N 8. Is inmate carrying medication?
- N 9. Does the inmate have any physical deformities?
- N 10. Does inmate appear to have psychiatric problems?

Yes/No

MEDICAL QUESTION

11. Do you have or have you ever had any of the following:
- | | | | |
|----------------|----------------------|---------------------------|-----------------------|
| N a) allergies | N e) epilepsy | Y i) high blood pressure | N m) ulcers |
| N b) arthritis | N f) fainting spells | N j) psychiatric disorder | N n) venereal disease |
| N c) asthma | Y g) heart condition | N k) seizures | N o) other(specify) |
| N d) diabetes | N h) hepatitis | N l) tuberculosis | |
12. Females only:
- N a) Are you pregnant? N b) Do you take birth control pills? N c) Have you recently delivered?
- N 13. Have you recently been hospitalized or treated by a doctor?
- Y 14. Do you currently take any medication prescribed by a doctor?
- N 15. Are you allergic to any medication?
- Y 16. Do you have any handicaps or conditions that limit activity?
- N 17. Have you ever attempted suicide or are you thinking about it now?
- N 18. Do you regularly use alcohol or street drugs?
- N 19. Do you have any problems when you stop drinking or using drugs?
- N 20. Do you have a special diet prescribed by a doctor?
- N 21. Do you have any problems or pain with your teeth?
- N 22. Do you have any other medical problems we should know about?

Medical Insurance: NONE

Doctor: NONE

Emergency Contact: ODELL GRAHAM

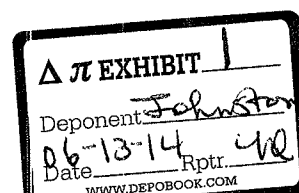
Relationship: BROTHER

Address:

City: JOLLIET

State: IL Zip:

Phone: [REDACTED]



JC000029

JONES COUNTY ADULT DETENTION FACILITY

Booking Medical Sheet: 67209

11/10/09 9:51

EXPLANATIONS (REFER TO QUESTION NUMBER)

Q11G: CONGESTIVE HEART FAILURE

Q11I: SAYS IT'S BORDERLINE

Q14: CORAD

Q16: HEART CONDITION

Q23: DISABILITY

I CERTIFY THAT I HAVE TRUTHFULLY ANSWERED THESE QUESTIONS ABOUT MY HEALTH.

Inmate's signature _____

Witness _____

Attending Officer _____

Date _____

Time _____

**Jones County Sheriff's Department
Adult Detention Facility**

Medical Sick Call Request Form Only

Inmate Name _____ Inmate # _____ Cell# _____

Jurisdiction _____ Date of Request _____

Medical Complaint

How long have you had this problem? _____
Have you been treated for this problem before? _____ (If yes, how many times?) _____

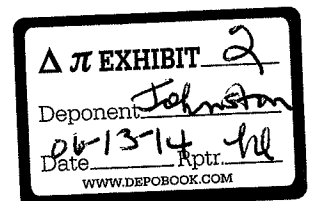
DO NOT WRITE BELOW THIS LINE

Date the request was received _____
Date of the Sick Call Visit _____
Time of the Sick Call Visit _____

Medical Staff Comments

Medical Staff Signature

There is a \$10.00 charge for all sick call visits.



JONES COUNTY ADULT DETENTION FACILITY

Activity Sheet for Booking #: 67209

04/23/10 11:37

ID #: 2009110172

Name: GRAHAM, ALBERT LEE

Cell: A160

Status: MIN

Class: JC SO

Hold Reason: CH

Holding For:

Activity Date/Time: 03/10/10 18:42 Activity: MVMTRANSFER

Old Facility: JCADF

Old Cell: 102

New Facility: JCADF

New Cell: A160

Amount:

Qty:

1

Extension:

Phone #:

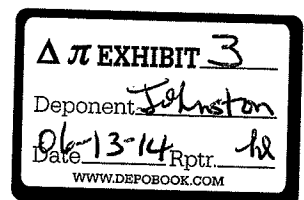
Completed:

Appointment Date/Time:

Officer:

2010020058

Notes:



2-29-10 Make Dental Apppt for
[REDACTED]
Albert Gualera BJ 1480

1-23-10 [REDACTED] March 1 11:00
[REDACTED] 3-1-10 11:00

EXHIBIT 4
Dependent Johnson
Date 8-13-14 Rpt. 40

3-9-10 [REDACTED]
3-10-10 beg. Test (+) on [REDACTED]
[REDACTED] Mrs Banner at 410
Contacted, Inmate % Spotting
Small amount, Mrs Banner noted
States she will get her a app
ASAP. Albert Graham BP 140
3-10-10 [REDACTED] in 102 % toothache
Returned call to Columbia fed
left Message. Spoke to Pine Belt
States they will pick up [REDACTED]
needs today [REDACTED] 433-119.
Attempted to call [REDACTED]
at 2:34 pm. No Ans. left Message
then phoned 649-5450. No Ans. 0

Δ π EXHIBIT 5

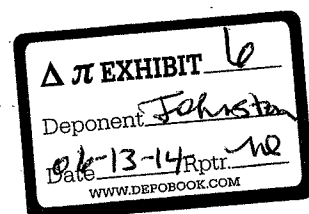
Deponent Johnson

Date 06-13-14 rpt. re

WWW.DEPOBOOK.COM

3-31-10 — Albert Graham BP 137
Spoke to Mr Davis regarding
dentist appt. for [REDACTED]
4-9-10 at 10:00
and [REDACTED] Reception
will call back re appt.

Blood & Sweat - Not Cheap
Try urology If gon or Chlamy
not admissible in court
JCHD doesn't do herpes test





Jones County Sheriff's Department
SHERIFF ALEX HODGE

MEDICAL TREATMENT FORM

Date 3-10-10

Time _____

Inmate Name Albert Graham Inmate # _____ Cell # B102

A.D.F. Inmate ☒ J.D. F Inmate _____

County Inmate ☒ State Inmate _____

Laurel P.D. _____ Ellisville P.D. _____

Other Agency _____

Medical Complaint yo A BP

Treatment Prescribing Anesthesia
State's Courtroom on Meads
more than

Was inmate transported to a medical facility? Y ☒ N

If so what facility? EMC Care provider who treated inmate D. Scaggs

All use of ambulance service or hospital treatment must first be approved by administration.

Administration notified yes

County Pay (adult) 6156492 ☒ (Juv) 6213147 _____

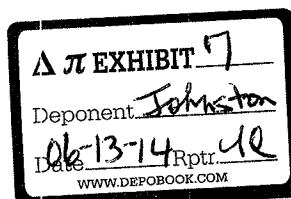
State Pay 6266923 _____ Laurel Police Pay 5061684 _____

Inmate Pay _____

I understand that the Jones County Sheriff Dept. will not be responsible for any preexisting medical conditions. I understand I will be responsible and I will be required to pay all medical expenses.

Inmate's signature Albert Graham

Print name Albert Graham



JC000028

03/02/2010 TUE 15:12 FAX 801 3630 JCSC BOOKING

0002/002

MAR 04 2010

AUTHORIZATION TO DISCLOSE HEALTH INFORMATION

I hereby authorize the use or disclosure of my individually identifiable health information as described below. I understand that I may refuse to sign this authorization, I understand that when the information is used or disclosed, it only be subject to being redacted and may no longer be protected by federal privacy regulations.

Patient Name: Albert L Graham Medical Record Number: _____
Social Security Number: 587 587 587 Date of Birth: 6-1-51
Individual/Organization authorized to make the disclosure: The Heart Clinic

Dates of service to be disclosed: _____

Please check the type of information to be used or disclosed:

- | | | |
|--|---|--|
| <input type="checkbox"/> Admission Record | <input type="checkbox"/> History & Physical | <input type="checkbox"/> Immunization Cards |
| <input type="checkbox"/> Emergency Record | <input type="checkbox"/> Operative Report | <input type="checkbox"/> Physician Clinic Visits |
| <input type="checkbox"/> Discharge Summary | <input type="checkbox"/> Laboratory Reports | <input type="checkbox"/> Plans, orders, or notes |
| <input type="checkbox"/> Radiology Reports | <input type="checkbox"/> Birth Record | <input type="checkbox"/> Other |
- ☒ General Abstract (includes admission record, O/C summary, H&P, ER record, consult, lab, radiology, EKG, EEG, operative report, cardiac respiratory reports, other disclosed reports)

This information may be disclosed to and used by the following individual or organization:

Name and Address: James L. Carney, Jr.

for the purpose of Continued Care

- I understand that these records may include information relating to AIDS (Acquired Immune Deficiency Syndrome) or infection with HIV (Human Immunodeficiency Virus), psychiatric care, or treatment of alcohol and/or drug abuse.
- I understand that I have a right to revoke this authorization at any time by notifying the providing organization in writing, but if I do it will not have an effect on any actions taken in reliance on my authorization before the disclosing organization received the revocation. I understand that the revocation will not apply to any insurance company when the law provides my insurer with the right to consult a claim under my policy.
- To request a Revocation of Authorization form, I may contact: SCRAM Privacy Officer, P.O. Box 602, Laurel, MS 39441.
- Unless otherwise provided, this authorization will expire on the following date, event, or condition: _____
(If no date is specified, this authorization will expire in six months from the date it is signed.)
- ☐ This authorization will not expire because my protected health information is being disclosed for research purposes.
- I understand that treatment, payment, enrollment, or eligibility for benefits may be conditioned on obtaining the authorization in the following circumstances:
 - For research related purposes.
 - If the authorization is sought by the health plan for eligibility or enrollment determinations relating to the individual or for its underwriting or risk rating determinations.
 - When the provision of health care is solely for the purpose of seeking protected health information for disclosure to a third party.

NOTICE TO PATIENT: The patient or patient's representative may inspect and/or request a copy of the health information to be used or disclosed in accordance with SCRAM policies.

Patient Name: Albert L Graham

Signature of patient or patient's representative: Albert L Graham Date: 2-17-10

If signed by legal representative, relationship to patient: _____

Witness: _____

TO BE COMPLETED BY PROVIDER:

Complete only if authorization is for marketing purposes:
SCRAM ☐ will ☐ will not resolve direct or indirect remuneration or compensation in exchange for using or disclosing the information listed above.

Date of Disclosure: _____

Check Initials: _____

DO NOT WRITE BELOW THIS LINE

**SOUTH CENTRAL
REGIONAL MEDICAL CENTER**
P.O. BOX 807 - LAUREL, MISSISSIPPI 39441



AUTHORIZATION TO DISCLOSE INFORMATION
AUTHDISC Rev. 11-2003

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RELEASE OF INFORMATION
DATE: 3-4-10 PAGES: 25
MAILED/FAXED EMP. 60

JONE COUNTY SHERIFF'S DEPT. TMENT
JONES COUNTY ADULT DETENTION FACILITY
SHERIFF ALEX HODGE

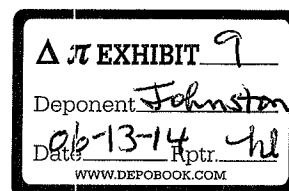
FACSIMILE TRANSMITTAL SHEET

TO: The Heart Center FROM: Donal
DATE: 3-2-10 TOTAL NO. OF PAGES INCLUDING COVER: 2
FAX NUMBER: 601-425-5525 RE:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

601-649-7502
5178 HIGHWAY 11 NORTH
ELLISVILLE, MS 39437



JC000837

4 pages

HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
7837569
Wassim Mouannes, MD

DATE OF BIRTH 06/01/51
ADMITTED 02/05/08

CHIEF COMPLAINT: Acute left parietal cerebrovascular accident.

HISTORY OF PRESENT ILLNESS: This is a 56-year-old black male, known to the Heart Care Center with a past medical history of nonischemic cardiomyopathy with an ejection fraction of 10% to 15%, nonsustained ventricular tachycardia, mild renal insufficiency, congestive heart failure. The patient was walking today, and while he was walking, he states that his right arm began to "flap," and that he was unable to control his right arm. He states that he also felt tingling and numbness in his right upper extremity, and in his right leg. The patient states that he was able to walk and slowly was able to walk back home. The patient states that over the course of the day, his symptoms have gradually improved, and now he no longer has right upper extremity weakness. He is able to move his right arm and right leg. The patient states also that when he first noticed the symptoms, approximately 9:30 a.m. this morning, he was having a hard time articulating his words at that time, but since then, he notices improvement. The patient denies any chest pain, shortness of breath, palpitations, syncope, or presyncope.

PAST HISTORY: Past Medical History: See above. Past Surgical History: Appendectomy.

HOME MEDICATIONS

1. Aspirin 81 mg once daily.
2. Coreg 6.25 mg 1 twice a day.
3. Digitek 0.125 mg once a day.
4. Diovan 40 mg once a day.
5. KCl 20 mEq once a day.
6. Lasix 40 mg twice a day.

ALLERGIES: No known drug allergies.

FAMILY HISTORY: His sister has congestive heart failure and chronic obstructive pulmonary disease. His mother is living and is healthy. Father's history is unknown.

SOCIAL HISTORY: He is married. He smokes about a pack per day. The patient used to drink about 6 beers per day. He denies any heavy liquor. Continued

HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
7837569
Wassim Mouannes, MD



**SOUTH CENTRAL
REGIONAL MEDICAL CENTER**

TRANSCRIPTION #1042

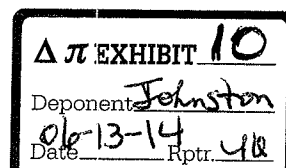
2601069

Approved 11/02

ADDRESSOGRAPH

167
RECEIVED FEB 15 2008

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HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
 7837569
 Wassim Mouannes, MD

ADMITTED 02/05/08

GENERAL. The patient is alert and oriented, in no acute distress.

HEENT. Pupils are round, regular, equal, and reactive to light and accommodation.

NECK. No jugular venous distention or carotid bruits.

CHEST. Lungs are clear without rhonchi, rales, or wheeze.

HEART. Regular rate and rhythm without any obvious murmur, rub, or gallop.

ABDOMEN. Soft, nontender, with positive bowel sounds.

EXTREMITIES. No clubbing, cyanosis, or edema. Pedal pulses are 2+ in the upper and lower extremities.

SKIN. Warm, dry, and intact.

NEUROLOGIC. The patient is alert and oriented x3.

DATA. EKG showed sinus rhythm with leftward axis deviation, prior R-wave progression with some nonspecific ST- and T-wave abnormalities. CBC reveals white blood cell count of 4.4, hemoglobin 13.2, hematocrit 38.9, platelets 253, sodium 141, potassium 3.8, chloride 105, CO₂ of 27, calcium 9.0, glucose 112, BUN 12, creatinine 1.28, pro-time 13.1, INR 1.1, APTT 27.2. Digoxin level is less than 0.2.

ADMITTING IMPRESSION:

1. Acute left parietal stroke.
2. History of severe, nonischemic cardiomyopathy with an ejection fraction of 15%.
3. Mild renal insufficiency.
4. History of nonsustained ventricular tachycardia.

Continued

CONFIDENTIAL

HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
 7837569
 Wassim Mouannes, MD



**SOUTH CENTRAL
 REGIONAL MEDICAL CENTER**

P.O. BOX 671 LAUREL, MISSISSIPPI 38446 (601) 476-4200

2661069

Approved 11/02

ADDRESSOGRAPH

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HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
7837569
Wassim Mouannec, MD

Continuation, page 2 of Physical Examination

PLAN

1. Will admit to telemetry.
2. Neurologic consultation.
3. Lovencex 40 mg subcutaneous daily.
4. The patient may need to begin Coumadin secondary to severely reduced ejection fraction, which may have possibly been the cause of the patient's stroke.
5. Further recommendations pending the patient's clinical course and response to treatment.

Broad-Garris, MSN, ACNP

Wassim Mouannec, MD

D: 02/05/08

T: 02/05/08/dn

CONFIDENTIAL

HISTORY
PHYSICAL EXAMINATION

GRAHAM, ALBERT L.
7837569
Wassim Mouannec, MD



**SOUTH CENTRAL
REGIONAL MEDICAL CENTER**

P.O. BOX 607 - LAUREL, MISSISSIPPI 39440 - (601) 420-4000

TRANSCRIPTION #1418

2601869

Approved 11/04

ADDRESSOGRAPH

RECEIVED FEB 15 2008



Electronically Signed

Patient: Graham, Albert L

Patient ID: 6948038

Date: 1/24/2008

Cardiology - Laurel

Office Visit

DATE OF SERVICE: 01/24/2008

PATIENT NAME: GRAHAM, ALBERT L

MRN: 6948038 DOB: 06/01/1951

DOB: 6/1/1951

HISTORY OF PRESENT ILLNESS: This is a pleasant, 56-year-old, African-American gentleman who is here for 1 week follow-up on his cardiomyopathy which was diagnosed in December. His ejection fraction is 10 to 15%. He did have nonsustained ventricular tachycardia, mild renal insufficiency, and congestive heart failure in the hospital. I asked him to increase his Coreg, the last time he did not increase it because he thought he could slow his heart beat by himself. His heart rate is still 77 beats per minute denies any chest pain, shortness of breath, palpitations, syncope. He does have mild dyspnea on exertion.

Past medical history, social history, surgical history, family history, review of systems otherwise unchanged.

CURRENT MEDICATIONS: Reviewed IC Chart.

PHYSICAL EXAMINATION:

VITAL SIGNS: Pressure 99/63 Pulse 77.

GENERAL: The patient looks alert, oriented and in no distress.

HEENT: PERRLA. Extraocular movements intact.

NECK: No jugular venous distention. No bruits.

CARDIOVASCULAR: Regular rate and rhythm.

LUNGS: Clear to auscultation bilaterally. No rales, wheezing.

ABDOMEN: Soft. Nontender. Non-distended.

EXTREMITIES: Good peripheral pulses in all 4 extremities. No clubbing, cyanosis or edema.

NEUROLOGICAL: Intact.

SKIN: Warm and dry.

IMPRESSIONS:

1. Severe nonischemic dilated cardiomyopathy.
2. Mild renal insufficiency.
3. Status post congestive heart failure.
4. Abnormal Adenosine Myoview study back in November showing a large inferolateral defect but no ischemia.

CONFIDENTIAL

PLAN:

At this time, I have urged the patient to go up on the Coreg to 6.25 twice a day to continue it for 3 months and at that time we may increase it again. He will follow-up with me in 3 months.

Wassim E Mouannes MD

TR: WEM/HW D: 01/24/2008 09:56:42 T: 01/24/2008 14:21:33
Conf #: U1418439 Dictation ID: 1964495

cc:

Approved & Electronically Signed: Wassim Mouannes, MD

1/24/2008 3:39:00 PM

CONFIDENTIAL